

**AUTHORIZATION FOR
ELECTRONIC FUNDS TRANSFER (EFT)
FOR TAX PAYMENTS**

EFT Number

To be assigned by Department of Revenue

Taxpayer Name	Contact Person
Mailing Address (Street Number, Apt. Number, Box Number)	FEIN or Social Security Number
	Telephone Number ()
City, State, ZIP	Fax Number ()
Email Address	

☐ Set Up Account
☐ Modify Account
☐ Change Bank Account Number
☐ Change Bank Transit and Routing
☐ Add Taxes

TAXES TO BE PAID BY EFT TRANSACTIONS.

Must be completed for either ACH debit or ACH credit.

See listing of taxes and tax type codes on reverse side

TAX TYPE	TAX TYPE CODE	YOUR DOR ACCT #

COMPLETE SECTION 1 AND/OR 2

Section 1—ACH Debit *

☐ **ACH debit**—taxpayer selects the EFT payment option on our web page or calls a toll free number

I hereby authorize the Colorado Department of Revenue (DOR), to initiate debit entries to my account and the financial institution (FI) named below, to debit the same to such account. This authority is to remain in full force and effect until DOR and FI have received written notification from me of its termination in such time and in such manner as to afford DOR and FI a reasonable time to act on it. The use of an EFT identification number and password will be required to convey my instructions for each transaction. The EFT identification number and password may be used by me or by my agent.

Bank Account Number	Transit/Routing Number (See reverse)	Type of Account <input type="checkbox"/> Saving <input type="checkbox"/> Checking	Kind of Account <input type="checkbox"/> Business <input type="checkbox"/> Consumer	Name on Account (Not Name of Bank)
Authorized Signature	Title			Date

***A voided check for the financial institution account indicated above MUST accompany this application.**

Section 2—ACH Credit

☐ **ACH credit**—taxpayer initiates through own financial institution.

I have contacted my financial institution and confirmed the financial institution can initiate Automated Clearing House credit transactions that meet Colorado Department of Revenue (DOR) requirements. For verification, DOR may contact:

Name of Bank	Bank Contact Person	Telephone Number
I hereby request DOR grant authority for the above named taxpayer to initiate Automated Clearing House credit transactions to DOR's bank account. I understand these must be in the NACHA CCD+ format using the Tax Payment (TXP) Convention and may only be initiated for the tax types that have been registered for EFT payments with DOR.		
Authorized Signature	Title	Date

Please return application to: Colorado Department of Revenue, CDO Research, 1375 Sherman Street, Denver CO 80261
or fax to (303) 866-3112

**ADDENDUM TO AUTHORIZATION AGREEMENT FOR
ELECTRONIC FUNDS TRANSFER (EFT) FOR TAX PAYMENTS
A SEPARATE TAX RETURN MUST BE FILED FOR MOST TAX PAYMENTS**

TAX TYPE DESCRIPTION	CODE		TAX TYPE DESCRIPTION	CODE
Delinquency/Bill Payment:			Individual Extension*	01404
Individual Income Bill*	210		Pass-Through Entity	01320
Severance Bill*	08405		Pass-Through Entity Estimated*	01220
Severance Withholding Bill*	01185		Pass-Through Entity Extension*	01420
Excise:			Sales:	
Cigarette	072		Aviation Fuel Consumers Use	05430
Fuel Distributors	052		Aviation Fuel Retailers Use	05420
IFTA	059		Aviation Fuel Sales	054
Liquor Excise	065		Consumer Use	045
LPG Inspection Surcharge	0531		County Lodging	074
Passenger Mile	0532		County Short Term Rental	04840
PUC Fixed Utility Fees*	204		Heavy Truck Sales	04230
Tobacco Products	073		Local Marketing District	04810
Gaming/Racing:			Prepaid Wireless E911 Surcharge	049
Dog Racing	1421		Retailer's Use	044
Gaming	141		Sales	042
Gaming Backup Withholding*	01114		Sales Tax License Renewal*	242
Horse Breeder's Fund	14221		Special District Sales	04202
Horse Racing	1422		Severance:	
Racing Cash Fund	1423		Coal	08503
Income:			Coal Estimated*	08502
Corporation	01312		Metallic Minerals	08603
Corporation Estimated*	01212		Metallic Minerals Estimated*	08602
Corporation Extension*	01412		Molybdenum	08613
Estate/Trust Estimated Income*	01712		Oil Shale	08103
Fiduciary	017		Oil Shale Estimated*	08102
Income Withholding*	011		Oil, Gas and CO2	08403
Income Withholding Annual Reconciliation	01102		Oil, Gas and CO2 Estimated*	08402
Individual	01304		Severance Withholding*	01180
Individual Estimated*	01204		Severance Withholding Annual Reconciliation	01181

***Do not file a tax return for these tax payments, the EFT transaction is the filing.
For all other tax payments, a tax return is required.**

Depositor Account Information

Sample Check:

2259

880

19

23-7
1020

Pay to the order of: _____

Anytown Bank Center, 1A Street, Anytown USA 80000

Anytown Bank
National Association (303) 000-0000

VOID

For _____

⑆ 102001017 ⑆ 1011234567 ⑆ 2259

↑

Transit and Routing Number (9 digits)

102001017

↑

Bank Account Number

1011234567

↑

Check Number